PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE ree Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FFE and PUBLICATION FFE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notificate	ed below or directed oth	ig the Patent, advanced in Block 1, b	e orders and notificati y (a) specifying a new	on of n	naintenance fees wi pondence address;	ill be mai and/or (b)	led to the current indicating a sepa	correspondence address as rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
38881	7590 02/09/	/2007		nave					
DICKSTEIN S 1177 AVENUE NEW YORK, N	I her State addr trans	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
					·			(Depositor's name)	
•					(Signature)				
								(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN		OR ATTORNEY DOCKET		Y DOCKET NO.	CONFIRMATION NO.	
09/922,484	9/922,484 08/03/2001		Joel D. Medloc			9824-070-999			
TITLE OF INVENTION				·		F =		T	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEI	E DUE	PREV. PAID ISSUE	FEE T	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES NO	\$7 00 1,4	\$300		\$0		\$1000-17.75	00.0005/09/2007	
EXAMINER		ART UNIT	ART UNIT CLASS-SUBCLA						
LE, LANA N		2618	2618 455-556000						
PLEASE NOTE: Unl recordation as set forth	e or agents OR, al (2) the name of registered attorn 2 registered pate listed, no name on THE PATENT (printed data will appear of NOT a substitute for file	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) adata will appear on the patent. If an assignee is identified below, the document has been filed for or a substitute for filing an assignment.							
(A) NAME OF ASSIC		, .	<u>.</u> .		and STATE OR CO	-			
Infineon Technologies AG - Munich, Germany									
Please check the appropri	iate assignee category or	categories (will not b	e printed on the patent)): 🗀	Individual Cor	poration o	or other private gro	up entity Government	
4a. The following fee(s) a Issue Fee Publication Fee (N Advance Order - #	A check is enc Payment by creating The Director is	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PRO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
• •	s SMALL ENTITY statu	s. See 37 CFR 1.27.			ger claiming SMAL				
NOTE: The Issue Fee and interest as shown by the	d Publication Fee (if requeecords of the United State	iired) will not be acce tes Patent and Tradem	pted from anyone othe ark Office.	r than tl	ne applicant; a regis	tered attor	ney or agent; or the	e assignee or other party in	
Authorized Signature	1000	C. Bru	tman		Date	ay	8,200	07	
Typed or printed name		EP 1311 E			Registration No		/	L. d. Hapro	
an application. Confident submitting the completed this form and/or suggesti	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bur	U.S.C. 122 and 37 C. USPTO. Time will very control of the control	lation is required to obt FR 1.14. This collection ary depending upon the chief Information	ain or ron is estine indiv	etain a benefit by the imated to take 12 m idual case. Any confr, U.S. Patent and Tourners and Tourners are The Appropriate to the confront of	e public winutes to on ments on rademark	complete, including the amount of time Office, U.S. Depa	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O.	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.